



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

**\*BIBDATASHEET\***

CONFIRMATION NO. 4924

Bib Data Sheet

SERIAL NUMBER 10/041,937	FILING DATE 01/08/2002  RULE	CLASS 340	GROUP ART UNIT 2632	ATTORNEY DOCKET NO. ROC920010292US1
-----------------------------	---------------------------------------	--------------	------------------------	--

APPLICANTS

Wright Jacken Nee, Rochester, MN;

\*\* CONTINUING DATA \*\*\*\*\* *None PTN*

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None PTN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 02/07/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <u>                    </u> Examiner's Signature <u>PTN</u> Initials	STATE OR COUNTRY MN	SHEETS DRAWING 4	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 3
---	---------------------------	------------------------	-----------------------	----------------------------

ADDRESS

Gero G. McClellan  
 Moser, Patterson & Sheridan, L.L.P.  
 Suite 1500  
 3040 Post Oak Boulevard  
 Houston, TX  
 77056-6582

TITLE

Emergency call patient locating system for implanted automatic defibrillators

FILING FEE  RECEIVED 1142	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
------------------------------------	---	---